

McLean County
Board of Review
Supervisor of Assessments

104 West Front Street, Room 705, Bloomington, IL 61701 (309) 888-5130

APPLICATION FOR SENIOR CITIZEN HOMESTEAD EXEMPTION

Property Owner's Name

Street Address of Property (homestead)

City, State, Zip

Daytime Phone

Parcel Index Number ____-____-____-____

Date of Birth ____/____/____

Assessment Year ____

Previous Exemptions on this property? Yes ☐ No ☐

Type of Residence: ☐ Single-Family Dwelling ☐ Townhome ☐ Apartment ☐ Duplex
☐ Condominium ☐ Other _____

Is the residence operated as a cooperative? Yes ☐ No ☐

Is the residence a life care facility under the Life Care Facilities Act? Yes ☐ No ☐

On January 1 were you the owner of record **or** did you have a legal or equitable interest in this property **or** did you have a life contract with a facility under the Life Care Facilities Act? Yes ☐ No ☐
If **NO** write the date you acquired an interest in this property. ____/____/____

On January 1 did you occupy this property as your legal residence? Yes ☐ No ☐
If **NO** write the date you first occupied this property. ____/____/____

On January 1 were you a resident of a facility licensed under the Nursing Home Care Act? Yes ☐ No ☐
If **YES** was this property occupied by your spouse, who is 65 years of age or older? Yes ☐ No ☐
Spouse's date of birth ____/____/____
Did the property remain unoccupied? Yes ☐ No ☐

On January 1 were you liable for the payment of real estate taxes on this property? Yes ☐ No ☐

The following documents may be required as proof that you are the owner of record or have a legal or equitable interest in the property: Deed, Trust agreement, Lease, Contract for deed, Life care contract. You will be advised if documentation is required. If documentation is required, a copy of the recorded instrument must be provided before the exemption can be approved.

I state that to the best of my knowledge, the information on this application is true, correct and complete.

Property owner's or authorized representative's signature

____/____/____
Date

SENIOR CITIZEN'S HOMESTEAD EXEMPTION GENERAL INFORMATION

What is the Senior Citizen's Homestead Exemption?

The senior citizen's homestead exemption (35 ILCS 200.15-170) provides for an annual \$2,000 reduction in the equalized assessed value of the property that you own and occupy, or lease and occupy, as your principal residence during the assessment year, and for which you are liable for the payment of property taxes. You may receive a pro-rata senior citizen's homestead exemption if property is first occupied as your principal residence after January 1 of any assessment year.

Who is eligible?

To qualify for the senior citizen's homestead exemption you must:

- Be 65 years of age or older during the assessment year
- Own or have a legal or equitable interest in property occupied as your principal residence during the assessment year
- Be liable for the payment of the property taxes

If you previously received a senior citizen's homestead exemption and now reside in a facility licensed under the Nursing Home Care Act (210 ILCS 45/1 et seq.), you are still eligible to receive this exemption provided

- Your property is occupied only by your spouse, who is 65 years of age or older, or
- Your property remains unoccupied during the assessment year.

A resident of a cooperative apartment building qualifies for this exemption if the resident is the owner of record of a legal or equitable interest in the property, occupies it as a principal residence, and is liable by contract for the payment of property taxes. A resident of a cooperative apartment building who has a leasehold interest does not qualify for this exemption.

A resident of a life care facility qualifies for this exemption if the resident has a life care contract with the owner of the facility and is liable for the payment of property taxes as required under the Life Care Facilities Act (210 ILCS 40/1 et seq.).

When and where must I file?

File this form with the McLean County Chief County Assessment Officer at the address shown below by May 30th of the assessment year for which you are applying. You may be required to provide additional documentation.

What if I need additional assistance?

If you need additional assistance with this form, please contact the McLean County Chief County Assessment Office.

McLean County Chief County Assessment Office
104 West Front Street Room 705
Bloomington IL 61701
Phone (309) 888-5130
FAX (309) 888-5208